



01/29/01

NONPROVISIONAL PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Attorney Docket No.: 106872

Date: January 29, 2001

BOX PATENT APPLICATION

Customer Number: 25944

**NONPROVISIONAL APPLICATION TRANSMITTAL
RULE §1.53(b)**

Director of the U.S. Patent and Trademark Office
 Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. §1.53(b) is the nonprovisional patent application

For (Title): OLEFIN-BASED RESIN COMPOSITION, METHOD OF MAKING IT AND ELECTRICAL
 WIRE COVERED WITH IT

By (Inventors): Masashi SATO, Tatsuya HASE, Hiroshi FUJIMOTO

- ☐ Formal drawings (Figs. ____; ____ sheets) are attached.
☒ A Declaration and Power of Attorney is filed herewith.
☒ An assignment of the invention to SUMITOMO WIRING SYSTEMS, LTD. is filed herewith.
☐ An Information Disclosure Statement is filed herewith.
☐ Entitlement to small entity status is hereby asserted.
☐ A Preliminary Amendment is filed herewith.
☐ Please amend the specification by inserting before the first line the sentence --This nonprovisional application claims the benefit of U.S. Provisional Application No. ____, filed ____--
☐ Priority of foreign application No. ____ filed ____ in ____ is claimed (35 U.S.C. §119).
☐ A certified copy of the above corresponding foreign application is filed herewith.
☒ The filing fee is calculated below:

**CLAIMS IN THE APPLICATION AFTER ENTRY OF
ANY PRELIMINARY AMENDMENT NOTED ABOVE**

FOR:	NO. FILED	NO. EXTRA
BASIC FEE		
TOTAL CLAIMS	12 - 20	= *
INDEP CLAIMS	3 - 3	= *
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS PRESENTED		

* If the difference is less than zero, enter "0".

SMALL ENTITY

RATE	FEE
	\$ 355
x 9 =	\$
x 40 =	\$
+ 135 =	\$
TOTAL	\$

**OTHER THAN A
SMALL ENTITY**

RATE	FEE
	\$ 710
x 18	\$
x 80	\$
+ 270	\$
TOTAL	\$ 710

- ☒ Check No. 115826 in the amount of \$710.00 to cover the filing fee is attached. Except as otherwise noted herein, the Director is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

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JAO:JSA/cln